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Bib Data Sheet

CONFIRMATION NO. 3914

<b>SERIAL NUMBER</b> 09/978,178	<b>FILING OR 371(c) DATE</b> 10/17/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1649	<b>ATTORNEY DOCKET NO.</b> 7570/73272	
<b>APPLICANTS</b> Jack Rogers, Arlington, MA; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/243,403 10/27/2000 <b>** FOREIGN APPLICATIONS *****</b> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 05/16/2002</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 42798					
<b>TITLE</b> PEPTIDES DERIVED FROM THE HUMAN AMYLOID PRECURSOR PROTEIN					
<b>FILING FEE RECEIVED</b> 1289	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		